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At first it was mainly confined to the poorer classes, low caste or non-Brahmanical caste Hindoos, but it has now attacked all classes and has caused the death of many Europeans and missionaries. It seems to be the history of famine years to be attended by an epidemic of cholera. The low tone of the physical condition of the people at such times is doubtless conducive to the ravages of this disease.

At Godhra, in the province of Gujarat, 13,000 people were employed on a government famine relief work. Cholera suddenly appeared at the camp, and in five days 3,000 people lay dead in the fields. The people became frightened and fled, spreading the germs of the disease wherever they went. There had been a few cases in the city of Bombay before this, but it at once commenced to increase among the famine refugees who had flocked into the city, and in the early part of July, as I have informed the Department by my dispatch, dated July 27, 1900, it was declared epidemic, having reached a death rate of over 100 per week. For the week ended August 14 there were 339 deaths from cholera, which has suddenly arisen to 764 for the week ended August 21, 1900, thus more than doubling in one week.

The following gives the number of cases and deaths in this city from cholera during seven days from August 16 to August 22, 1900, inclusive: August 16, 85 cases, 116 deaths; August 17, 107 cases, 114 deaths; August 18, 134 cases, 116 deaths; August 19, 136 cases, 121 deaths; August 20, 137 cases, 98 deaths; August 21, 143 cases, 106 deaths; August 22, 92 cases, 77 deaths; total, 834 cases, 751 deaths.

On account of the heavy rainfall, which amounts to about 60 inches since the 1st of July, the general unsanitary condition of the city, the high price of foodstuffs resultant of the famine, the poorly sheltered, scantily clothed, and underfed condition of the poor class of the city, the outlook is not of especial promise.

Respectfully, WILLIAM T. FEE,
United States Consul.

Hon. ASSISTANT SECRETARY OF STATE.

JAPAN.

Measures adopted in Japan for the suppression of plague.

[Translated in this Bureau from report of the plague epidemic in Kobe and Osaka of 1899 and 1900. By Prof. S. Kitasato and Drs. Takaki, Shiga, and Moriya.]

As will be seen in law No. 36, of May 30, 1897, the duty of carrying out the law and of meeting the larger share of the costs falls upon the community. The central and local governments have the oversight of measures. The sanitary and medical management belong to the ministry of the interior and its coadjutor, the central sanitary commission, which acts as an advisory body. A local sanitary commission is attached to each government presidency. The ministry of the interior includes a section for sanitary and medical affairs, to which are appointed 1 director, 1 government counsellor, 3 technical advisers, and 3 sanitary inspectors. Law No. 19, in regard to port quarantine against arrivals from foreign ports or Formosa was promulgated in February, 1899.

As the first case which occurred in Hiroshima was undoubtedly due to infection from Formosa, the Government directed the port quarantine to be more stringently enforced.

The plague bacillus which was imported into Kobe was apparently conveyed in ships' sweepings or in dirty merchandise. The Govern-

ment, therefore, prohibited the importation of rags, old wadding, old clothing, old paper, old leather or skins, and old feathers from all ports of India and China, and also from Hongkong and Formosa. To this list were added old carpets and old hemp bags. Sweepings of vessels which have arrived directly or indirectly from infected ports shall not be brought on shore, but either burned or thrown into the sea at a distance of at least 12 kilometers from port.

Up to this time the period of observation of a plague-infected ship was seven days. It was considered that the period of incubation lasted at most a week. By general order No. 56 the time was increased to ten days.

The governor-general of Formosa has ordered that all travelers from Formosa to the mother country must undergo medical inspection before departure.

The object of these measures is to prevent fresh importation of plague bacilli.

After the two cities of Kobe and Osaka had become infected it was of the highest importance to endeavor to extinguish the disease in the germ and prevent its spread to neighboring localities. By ministerial order of November 16 and 21, 1899, it was forbidden to convey the articles mentioned above from Kobe and Osaka to other places, and, if such transfer had taken place, it was ordered that the articles should not be distributed. Persons who had taken passage by boat or rail from Kobe and Osaka were required to undergo medical inspection at all ports and stations of importance. Passenger steamers were disinfected.

Inasmuch as rats are carriers and spreaders of disease, their capture is ordered not only in the infected localities, but in all ports of Japan. Dead rats must in all cases be bacteriologically examined, and in case of positive results the houses in which they were found must be disinfected. (Order of December 12, 1899.) Thorough cleaning was undertaken in all ports of Japan, and in the cities where the population was dense and trade active, such as Tokyo and Yokohama, medical inspection of the quarters inhabited by the poor and by the working class was undertaken in order to insure discovery of the first case and prevent spread.

The following measures were carried out at Kobe and Osaka:

When a suspicious case comes to the notice of the sanitary police through report of a physician, medical inspection, or necropsy, an experienced medical expert shall be sent to investigate the case. If the clinical symptoms are not sufficient to establish the character of the disease, bubonic fluid, sputum, spleen exudate, or heart blood should be taken and bacteriologically examined. If the disease is proved by this means to be plague, the patient is to be removed to a hospital for epidemic diseases, which should exist in every community, and the corpse should be burned in a crematory. The hospitals are supplied with a medical director and efficient physician and nurses; also medicines, medical instruments, and appliances for examination. The healthy persons who have brought the patient to the hospital or the body to the crematory shall be isolated in a specified place, which shall be provided with physicians and nurses.

Rat traps and rat poison have so far been found unsatisfactory.

Personal and bed clothing shall be disinfected in a portable apparatus. Household furniture and utensils, walls and ceilings with 5 per cent carbolic-acid solution, floors, kitchens, drains, sinks, and yards with slaked lime or limewater. Corrosive sublimate is of only exceptional application. Mattresses and old shoes and, in general, articles of little value should be burned.

Dead rats must be bacteriologically examined and in case of positive results the houses in which they were found must be disinfected. Observation of such houses is recommended.

The degree to which communication with the vicinity of suspected localities is prohibited depends on the nature of the communication, and the application of strict measures is not recommended. In the case of a house situated in a garden, only the grounds need be watched. In houses built in a block, the entire block must be observed. In the case of the poor, the entire street should be under observation.

Plague infection in Kobe traced to ships' sweepings.

In Kobe there exists a trade for handling ships' sweepings. This trade includes many articles which are of some value, as, for instance, rice, beans, cotton wad, fragments of iron, and not infrequently of copper, silver, also silver and gold coin. The sweepings are examined at a particular place, and articles of value are sold to 3 dealers, whose names are Yata, Hashimoto, and K. Adachi. The rest is burned or thrown into the sea at a distance of at least 12 kilometers from the harbor.

Among the vessels from plague ports not in Japan which have been handled by this trade we find the steamship *Kagoshima Maru*, which arrived from Bombay, by way of Colombo, Singapore, and Hongkong, on October 7, 1899, and the cargo of which consisted chiefly of Bombay cotton and Chinese rice. The sweeping of the ship was given to the company named on the 10th of the same month. The materials found in the sweepings were given to the two merchants, Yata and K. Adachi. The 2 patients, Y. Adachi and K. Kawai, were workmen employed by these merchants. They had much to do with the materials found in the sweepings. Some of the stuff was sold to other dealers. Cases and deaths were traced to these foci.

One patient, a little girl, was employed to feed chickens. It was found that rice used in feeding the fowls was from the sweepings of the rice cargo.

JAPAN.

Disinfection of steerage passengers at Yokohama discontinued.

YOKOHAMA, JAPAN, *August 20, 1900.*

SIR: I have the honor to inform you that the disinfection of steerage passengers, which has been carried on at this port since the first outbreak of plague last November, has been discontinued.

This discontinuance has been brought about through the disinclination of the steamer companies to pay the expenses of a disinfection depot under circumstances in which disinfection is not absolutely required by the terms of the law, and I have consented to the same in view of the facts that no case of plague has occurred in Japan for over one month, that no other infectious quarantinable disease is now prevalent anywhere within this Empire, and that emigration of the lower and laboring classes is now practically prohibited by the Japanese Government.

It is, however, clearly understood by the shipping interest here that should epidemic quarantinable disease appear at any time the precautions of the law will be strictly carried into effect, and that it must supply the needful establishment and equipment.

Respectfully, STUART ELDRIDGE,
Acting Assistant Surgeon, U. S. M. H. S.

The SURGEON-GENERAL,
U. S. Marine-Hospital Service.